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04372 7590 11/27/2006
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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/731,626	12/09/2003	Tiina-Liisa Rasanen	108306-00034	4756

TITLE OF INVENTION: METHODS FOR THE TREATMENT AND PREVENTION OF PANCREATITIS AND FOR INDUCTION OF LIVER REGENERATION

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$0	\$1000	02/27/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
KWON, BRIAN YONG S	1614	514-674000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list <input type="checkbox"/> (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, <input type="checkbox"/> (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	1 Arent Fox LLP 2 3 01 FC:2581 700.00 OP
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)		02 FC:1504 03 FC:8001 300.00 OP 30.00 OP

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(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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<input checked="" type="checkbox"/> Advance Order - # of Copies <u>10</u>	<input checked="" type="checkbox"/> The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number <u>01-2300</u> (enclose an extra copy of this form).

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Authorized Signature

Date February 21, 2007

Typed or printed name Dawn C. Russell

Registration No. 44,751

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